

Health Department
HALL-HAMILTON-MERRICK 715 16th Street • Central City, Nebraska 68826 • (308) 946-3103 • FAX (308) 946-2086

FOOD VENDOR PERMIT APPLICATION

(For Food Vendors Operating within the Grand Island City Limits for Up to 3 Consecutive Days)

Date of Application:				
Dates of Operation:				
Type of Permit: \$18.00				
\$35.00 <u> </u>	-	– May 1 t	hrough April 30 <i>(1</i>	/2 Price after November)
Location of Event:				
Business Name:				
Business Address:				
Business Phone:				
Owner Name:				
Owner Address:				
Owner Phone:				
	Mobile Food U			
	Temporary (ter	nt, stand, e	etc.)	
Total Number of Units (Ea	ach unit requires a	a separate	e permit):	
Total Permit Fee Due: \$_	Paid:	Cash	Check#:	Money Order
Signature of Owner/Appli	cant:			Date:

It shall be unlawful for any person authorized to do business under a food vendor permit to conduct such business on any streets listed in s13-17 congested parking area of the Grand Island City Code. October 2013-September 2014